



THOMAS L. GARTHWAITE, M.D.
Director and Chief Medical Officer

FRED LEAF
Chief Operating Officer

COUNTY OF LOS ANGELES
DEPARTMENT OF HEALTH SERVICES
313 N. Figueroa, Los Angeles, CA 90012
(213) 240- 8101

BOARD OF SUPERVISORS

Gloria Molina
First District

Yvonne Brathwaite Burke
Second District

Zev Yaroslavsky
Third District

Don Knabe
Fourth District

Michael D. Antonovich
Fifth District

May 9, 2002

ADOPTED
BOARD OF SUPERVISORS
COUNTY OF LOS ANGELES

The Honorable Board of Supervisors
County of Los Angeles
383 Kenneth Hahn Hall of Administration
500 West Temple Street
Los Angeles, California 90012

31

MAY 21 2002

Violet Varona-Lukens
VIOLET VARONA-LUKENS
EXECUTIVE OFFICER

Dear Supervisors:

**APPROVAL OF SUBSTANCE ABUSE AND CRIME PREVENTION ACT OF 2000
(PROPOSITION 36) - FISCAL YEAR 2002-03 COUNTY PLAN
(All Districts) (3 Votes)**

IT IS RECOMMENDED THAT YOUR BOARD:

1. Approve the attached Los Angeles County Plan, substantially similar to Attachment B, which complies with the regulatory requirements of the Substance Abuse and Crime Prevention Act of 2000 (Act or Proposition 36), under the Substance Abuse Treatment and Testing Accountability Program for the purpose of substance abuse testing and other purposes consistent with the Federal Block Grant requirements.
2. Approve and delegate approval authority to the Director of Health Services, or his designee, to sign future County Plans, for subsequent Fiscal Years 2003-04 through 2005-06, following approval by County Counsel.

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTIONS:

The Act provides funding for counties to provide community-based drug treatment services for certain persons convicted of non-violent drug possession and use offenses. An annual Board-approved County plan for implementation of the Act, which meets the requirements of Chapter 2.5, Title 9 of the California Code of Regulations, must be submitted to the California Department of Alcohol and Drug Programs (State ADP) by May 1, 2002 in order to receive these funds. In recognition of the short time frame they require, the State ADP has advised counties that they may submit a draft county plan, which DHS ADPA has done, to meet the May 1 due date, pending final approval by their Boards of Supervisors.

On May 15, 2001, your Board approved the Los Angeles County Implementation Plan developed by the Countywide Criminal Justice Coordination Committee (CCJCC). This Board designated the Department of Health Services (DHS) Alcohol and Drug Program Administration (ADPA) as lead County agency and established a trust fund for funds received pursuant to the Act. On December 18, 2001, your Board approved a revised County Plan which was required for the County to receive additional funds for the purpose of substance abuse testing and other purposes consistent with Federal Block Grant requirements.

The proposed recommendations are necessary to ensure that the County receive the preliminary allocations of \$30,348,378 in State Proposition 36 funds and \$2,305,726 in Federal Substance Abuse Prevention and Treatment Block Grant funds for Fiscal Year 2002-03 pursuant to the Act to enable the County to continue to comply with the statutory requirement to provide community-based drug treatment, drug testing and other necessary services for eligible drug offenders beginning July 1, 2002.

Without this additional funding, the County would either have to divert existing resources, or be out of compliance with the statutory mandate to place certain non-violent drug offenders on probation and into community-based drug treatment programs beginning July 1, 2002. An estimated 15,000 drug offenders will be eligible for drug treatment under the Act in Fiscal Year 2002-03.

The DHS ADPA is recommending delegation of approval authority of subsequent County plans. It is anticipated that future plans will entail non-substantive, technical changes only and delegation authority will allow for administrative ease of approval and submission to the State within critical time frames. The Board will be provided with copies of subsequent plans, as well as any changes and future actions. Delegation of approval authority is made in accordance with California Code of Regulations.

Implementation of Strategic Plan Goals:

Approval of the recommended action is consistent with the County Vision by providing services demanded by the community as evidenced from the voter approval of Proposition 36. Implementation is consistent with the mission of the Alcohol and Drug Program Administration to reduce community and individual problems in Los Angeles County related to alcohol and other drug use. Diverting non-violent drug offenders into treatment promotes the self-sufficiency of these offenders and results in the overall well being and prosperity of our local communities.

FISCAL IMPACT/FINANCING:

The Act will provide \$120 million annually from FY 2002-03 through FY 2005-06. Los Angeles County's allocation for FY 2002-03 is \$30,348,378. It is anticipated that allocations for FY 2003-04 through FY 2005-06 will remain substantially the same.

FY 2002-03 program expenditures are estimated at approximately \$38.5 million, and have been included in the Department's Proposed Budget. These expenditures will be funded by the overall State allocation of \$30.3 million plus approximately \$7.8 million of Proposition 36 funds already received and held in the designated Proposition 36 Trust Fund. This trust fund received the initial six-month FY 2000-01 start-up allocation that was held over to fund and sustain the program through the end of the

5th year. Subsequent years' program expenditures will be included in the department's budget. There are no net County costs associated with this action. The multi-year program expenditures are incorporated in a 5-year spending plan that was reviewed and jointly agreed upon with the Chief Administrative Office.

Drug testing funds for Proposition 36 participants were made available with the passage of SB 223 which was approved by the Governor on October 10, 2001. These funds are administered through the Substance Abuse Treatment and Testing Accountability (SATTA) Program. Los Angeles County's allocation is \$2.3 million and is included in the DHS ADPA Proposed Budget. ADPA is in the process of selecting a vendor to provide the drug testing services and will later present this contract for your approval.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS:

The CCJCC Proposition 36 Implementation Task Force was established to develop a planning process for a comprehensive system of care for drug offenders under this Act. The Task Force is comprised of 36 participating organizations including the Superior Court, Department of Health Services, Chief Probation Officer, Sheriff, District Attorney, Public Defender, County Counsel, Chief Administrative Office, Department of Mental Health, Department of Public Social Services, Community and Senior Services, municipal prosecutors, the State Board of Prison Terms, Parole, and drug treatment provider associations.

A Task Force Steering Committee has been actively engaged in overseeing the efforts to provide a comprehensive system of care, together with accountability and public safety supervision, for eligible drug offenders in Los Angeles County. The Steering Committee conducted Regional Roundtable meetings throughout the County, which were open forums to discuss, review and seek input regarding the implementation and operation of the Proposition 36 program. Regular meetings are also conducted by the Alcohol and Drug Program Administration with the involved agencies and community collaboratives impacted by Proposition 36.

IMPACT ON CURRENT SERVICES:

Funds received pursuant to the Act will continue to provide the necessary financial resources to expand and enhance the array of services for drug offenders to meet the statutory requirements for community-based drug treatment services for certain drug offenders beginning July 1, 2002. For any new positions created by this program, the DHS ADPA will first utilize any lay-off/rehire list that may be in effect for recruiting purposes.

All eligible drug offenders currently undergo an assessment of their treatment and other service needs by contracted Community Assessment Services Centers (CASCs), and are referred to community-based drug treatment programs, based on the appropriate treatment level and supervision necessary. Drug treatment services consist of a three-level system increasing in duration and intensity depending upon the assessed severity of the offender. Drug testing funds are being used for testing and other purposes consistent with federal law which requires funds to be used for planning, carrying out, and evaluating activities to prevent or treat substance abuse.

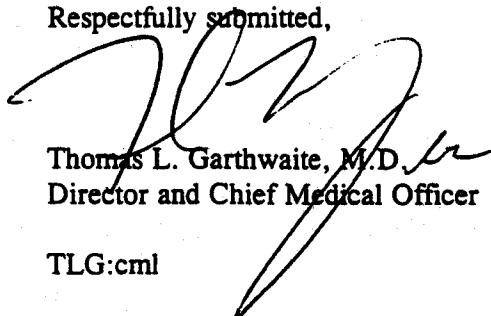
The Honorable Board of Supervisors
May 9, 2002
Page 4

The Probation Department provides criminal record assessments on potential program participants and assesses for community supervision risk levels and caseload recommendations. Deputy Probation Officers receive information from treatment providers regarding the progress of the participant in treatment, including drug testing results, attendance at required sessions and other necessary information. This information is forwarded regularly to the courts. Violations and other potential problems are reported within 72 hours.

While it is still too early to determine the actual impact of the Act on the County's system of services, it is the mission of the Implementation Task Force to provide coordinated strategies to ensure that the criminal justice and treatment agencies in Los Angeles County continue to work together to effectively implement the Act and provide a comprehensive system of care, together with accountability and public safety supervision.

When approved, this Department requires three copies of the Board action.

Respectfully submitted,



Thomas L. Garthwaite, M.D.
Director and Chief Medical Officer

TLG:cml

Attachment (1)

c: Chief Administrative Officer
Chief Probation Officer
County Counsel
Executive Officer, Board of Supervisors

BLCD2042.ds

SUMMARY OF LOS ANGELES COUNTY PLAN

1. **TYPE OF SERVICE**

The Los Angeles County Plan for Fiscal Year 2002-03 for the Substance Abuse and Crime Prevention Act of 2000 (Proposition 36) provides for community-based drug treatment, drug testing and other necessary services for eligible offenders.

2. **AGENCY ADDRESS AND CONTACT PERSON**

Department of Alcohol and Drug Programs
1700 K Street
Sacramento, California 95814
Attention: Director

3. **TERM**

July 1, 2002 through June 30, 2003 and for subsequent Fiscal Years through 2005-06.

4. **FINANCIAL INFORMATION**

Preliminary allocations of \$30,348,378 in State Proposition 36 funds and \$2,305,726 in Federal Substance Abuse Prevention and Treatment Block Grant funds for Fiscal Year 2002-03.

5. **GEOGRAPHIC AREAS SERVED**

All Supervisorial Districts

6. **ACCOUNTABILITY FOR PROGRAM MONITORING AND EVALUATION**

Patrick L. Ogawa, Director, Alcohol and Drug Program Administration

7. **APPROVALS**

Public Health:	John F. Schunhoff, Ph.D., Chief of Operations
Alcohol and Drug Program Administration:	Patrick L. Ogawa, Director
Contracts and Grants Division:	Riley J. Austin, Acting Chief
County Counsel (as to form):	Robert E. Ragland, Deputy County Counsel

Substance Abuse and Crime Prevention Act (SACPA) of 2000
California Department of Alcohol and Drug Programs

COUNTY OF LOS ANGELES

FY 2002-03 PLAN

**Substance Abuse and Crime Prevention Act of 2000
(SACPA)**

April 22, 2002

**Patrick L. Ogawa
Director
Department of Health Services
Alcohol and Drug Program Administration**

**This plan is submitted pursuant to Section 9515, Chapter 2.5, Division 4,
Title 9, California Code of Regulations (CCR)**

Original Plan Questions for Fiscal Year 2002/2003, Version 1

Status: Draft

Created: 03/21/2002

Last Revised: 04/19/2002

To update Plan Questions, answer each question and click the Submit button.

1. Has the county board of supervisors approved the 2002-2003 county plan or approved a written delegation of approval authority to the county lead agency from the county board of supervisors? [ref: §9515 (b)(3)]
(Check one)
☐ Yes
☒ No (expected date of approval) May 2002

2. Identify the county agencies and other entities involved in developing the county plan.
(Check all that apply)
Required
☒ County alcohol and other drug agency
☒ Court
☒ Parole authority
☒ Probation Department
Other
☒ County executive office
☒ County mental health
☐ County office of education
☒ County public health
☐ County social services
☒ District attorney
☐ Police department
☒ Sheriff
☒ Workforce Investment Board
☒ Other (specify) Public Defender, Chief Admin Office, Narcotics and Dangerous Drugs Commission, End of Prison Terms

3. List impacted community parties that collaborated in development of the county plan.
(Check all that apply)
Required
☒ Providers of drug treatment services in the community
☒ Representatives of drug treatment associations in the community
Other
☐ Civic groups
☒ Clients / Client groups
☐ Colleges/Universities (specify) _____
☐ Local business representatives
☒ Non-profit organizations
☐ Parent Teacher Group / Parent Teacher Association
☒ Workforce Investment Board
☐ Youth organizations
☐ Other (specify) _____

4. How was community input collected?
(Check all that apply)
☒ Community meetings
☒ County advisory groups
☐ Focus groups
☒ Other method(s) (explain briefly) Regional Roundtables, Community Assess Service Ctr Mtgs., Provider Mtgs., Community Collaborat

5. If there are federally recognized American Indian tribe(s) located within your county, did you include their input?
(Check one)
☒ Yes (required if such tribes are located in your county)
☐ No federally recognized American Indian tribe(s) in the county

6. Specify how often entities and impacted community parties met to develop the county plan.
(Check one)
☐ 1-2 times per year
☐ 3-4 times per year
☒ 5 or more times per year

7. Specify how often entities and impacted community parties will meet to continue on-going coordination of services and activities.

(Check one)

- ☐ Every three months
☒ 4-8 times per year
☐ 9 or more times per year

8. What services are available to SACPA clients under the county plan?

(Check all that apply)

- ☒ Drug treatment
☒ Family counseling
☒ Literacy training
☒ Mental health
☒ Vocational training
☒ Other (specify)

9. Identify the entity(ies) responsible for determining a client's level of need for, placement in, and referral to drug treatment.

(Check all that apply)

- ☐ County alcohol and other drug agency
☒ Probation Department
☒ Drug treatment provider(s)
☒ Other (specify)

10. Identify the entity(ies) in your county responsible for determining a client's level of need for, placement in, and referral to additional services supplemental to treatment.

(Check all that apply)

- ☐ County alcohol and other drug agency
☒ Drug treatment provider(s)
☒ Probation department
☒ Other (specify)

11. What assessment tools are being used in your county for SACPA clients?

(Check all that apply)

- ☒ ASI (Addiction Severity Index)
☒ ASAM PPC (American Society of Addiction Medicine Patient Placement Criteria)
☐ Other (specify)

12. Will drug testing be required for SACPA clients in your county?

(Check one)

- ☒ Yes
☐ No

13. What other sources of funds, if any, will be used to pay for drug testing? (ref: §9530 (i))

(Check all that apply)

- ☒ Client fees
☐ Additional funds budgeted by the county
☒ Other (specify)

14. Has there been a change in Lead Agency designation?

(Check one)

- ☐ Yes
☒ No

Notes

Community Assessment Services Centers (CASCs) conduct individual assessments for eligible Prop 36 clients at 11 sites located throughout the County. The CASCs are staffed by professional treatment assessment personnel.

LOS ANGELES COUNTY

FY 2002-03 PLAN

Substance Abuse and Crime Prevention Act of 2000 (SACPA)

PART II

1. Describe the collaborative processes used to plan service. Describe the process and activities used to solicit and include input. [ref: '9515(b)(2)(A)]

The **Los Angeles County Proposition 36 Implementation Taskforce**, under the umbrella of the Los Angeles Countywide Criminal Justice Coordination Committee, developed the County's Proposition 36 Plan. The Taskforce designated a smaller **Steering Committee, composed of representatives from the Court, Probation, Public Defender, District Attorney, Board of Prison Terms, Sheriff, Chief Administrative Office, Treatment Providers Association, Narcotics and Dangerous Drugs Commission and the Department of Health Services Alcohol and Drug Program Administration (ADPA)**, to continue oversight, modifications and update of the County's plan. The Steering Committee conducted **Regional Roundtable meetings throughout Los Angeles County, which were open forums to discuss, review and seek input regarding the implementation and operation of the Proposition 36 program. Regular meetings are also conducted by ADPA** with the Community Assessment Service Centers, Proposition 36 contracted-treatment providers, and local region collaboratives.

2. Describe the treatment providers and the services to be provided. [ref: '9515(b)(2)(B)]

Client flow must be consistent with the following time lines: notice from probation/parole to treatment provider within seven days; provider submits treatment plan to probation/parole within 30 days; provider submits quarterly progress reports to probation/parole; drug treatment services do not exceed 12 months; aftercare services do not exceed 6 months. [ref: Penal Code '1210.1(c) and 3063.1(c)]

Services described in this section must be consistent with planned county reported planned expenditures, client projections, and projected capacity.

Describe:

- a) Your treatment providers and the treatment and aftercare services they will provide (for instance, Level 1,2,3,4; or outpatient, residential, etc.)

- b) Your providers of additional services (literacy instruction, vocational counseling, family counseling, etc.) supplemental to treatment and the additional services they will provide.
- c) Case management activities including referral process and client flow from court to probation to provider and from parole entity to provider.

In Los Angeles County, the Department of Health Services Alcohol and Drug Program Administration (ADPA) **contracts with community-based substance abuse treatment and recovery programs to provide a comprehensive array of services.** Treatment services for Proposition 36 participants consist of a **three-level system** which increases in duration and intensity depending on the assessed severity of the participant. The minimum duration is 18 weeks/4 ~~1~~ months for the lowest level of severity (Level I), 32 weeks/8 months for mid-level severity (Level II), and 40 weeks/10 months for the most severe level (Level III). The actual length of time depends upon completion of the Treatment Plan goals and objectives but shall not exceed one year as mandated by Proposition 36. **Services within each of the three levels include outpatient treatment, daycare habilitative, narcotic replacement therapy, and residential treatment. Treatment services consist of individual and group counseling as well as education sessions, and mandatory attendance at self-help group meetings.** The intensity and number of required sessions, including residential treatment, is based on the assessed level of severity, public safety concerns, and Court-ordered level of treatment. Drug testing ranges from 1-2 times per week and is included in all levels of treatment.

As part of their contracted services, **treatment programs in Los Angeles County are required to provide a continuum of care** which addresses the unique needs and issues of the individual clients such as age, race, culture, gender, pregnancy, parenting, housing and employment. **These services are either provided by the treatment agency or arranged through a system of community-based linkages with appropriate service agencies. Supplemental treatment services include literacy training, vocational counseling, mental health and health services.**

The Superior Court designated 26 courtrooms to handle Proposition 36 cases. The responsibility of these Proposition 36 Monitoring Courts includes sentencing eligible defendants, monitoring their treatment progress, and when necessary, conducting violation hearings. **The Monitoring Courts refer clients to one of eleven Community Assessment Service Centers (CASCs) located throughout the County, for assessment of treatment needs and referral to an appropriate substance abuse treatment program based on the client's level of need. Deputy Probation Officers are co-located at each of the eleven CASCs to provide clients with an orientation as to the terms and conditions of probation and to coordinate the initial provision of treatment and supervision services.**

The entire process is conducted in a timely manner to reduce barriers to treatment services. Clients are instructed to contact CASCs for an assessment appointment within

48 hours of sentencing. Appointments/arrangements for entering treatment services are confirmed following the assessment. Treatment providers are submitting Treatment Plans to the Court and Probation within 30 days or at the first court appearance following sentencing. Treatment progress reports are submitted to the Court and Probation every 30 days, or as ordered by the Court.

Eligible probationers and parolees are processed in the same manner as all eligible clients. The goal of the County's plan is to provide court-supervised treatment and probation to eligible offenders to break the cycle of drugs and crime, while still promoting public safety. **Assessments for eligible clients are conducted at the CASCs and referrals are made to appropriate substance abuse treatment programs.** Progress reports are submitted to the Los Angeles Superior Court and Probation Department or the Board of Prison Terms, as appropriate.

3. Describe the treatment goals for SACPA clients.

Treatment services for alcohol and other drug problems provided under the Los Angeles County Proposition 36 program are based on the basic overarching research-based principles of effective treatment identified by the National Institute of Drug Abuse (NIDA). All treatment providers contracted by the Los Angeles County Department of Health Services Alcohol and Drug Program Administration are required to adhere to those principles.

The Los Angeles County Proposition 36 Implementation Plan provides for court-supervised treatment and probation for offenders to break the cycle of drugs and crime while still promoting public safety. **The treatment goals for Proposition 36 clients, in accordance with NIDA principles, are to help the individual stop using drugs and maintain a drug-free lifestyle while achieving productive functioning in the family, at work, and in society.** This is also in accordance with Proposition 36, which indicates that as a result of the successful completion of treatment, there is cause to believe that the defendant will not abuse controlled substances in the future.

4. Describe the criteria the county will use to monitor and enforce the quality of treatment services. If treatment services are provided by contract, describe or list the tools available through contract enforcement to monitor and enforce the quality of services. [ref: ACLA #01-19]

The ADPA Contract and Services Division (Contract Division) is responsible for monitoring alcohol and other drug treatment agencies that contract with Los Angeles County. **In addition to monitoring compliance with Federal, State, and County laws, regulations and contracts, the Contract Division uses a standardized monitoring instrument to ensure compliance with the County's Proposition 36 Plan. A specialized Proposition 36 Unit has been established within this division to conduct annual monitoring visits of treatment providers, as well as provide on-site technical assistance, as appropriate.** In addition, a toll-free "Proposition 36

HelpLine” has been established to address issues, problems and questions from the Court, treatment providers and clients in a timely manner. Treatment services for alcohol and other drug problems provided under the County’s Plan are based on the research-based principles of effective treatment identified by the National Institute of Drug Abuse (NIDA).

5. Describe the criteria the county will use to monitor and enforce the quality of *additional services supplemental to treatment*. If additional services are provided by contract, describe or list the tools available through contract enforcement to monitor and enforce the quality of services.

As part of their contracted services, treatment programs in Los Angeles County are required to provide a continuum of care which addresses the unique needs and issues of the individual clients such as age, race, culture, gender, pregnancy, parenting, housing and employment. Additional services supplemental to treatment are either provided by the County’s contracted treatment agencies or arranged by the treatment provider through a system of community-based linkages with appropriate service agencies. **As reported above, the ADPA Contract and Services Division is responsible for monitoring alcohol and other drug treatment agencies that contract with Los Angeles County. In addition to monitoring compliance with Federal, State, and County laws, regulations and contracts, this division uses a standardized monitoring instrument to ensure compliance with the County’s Proposition 36 Plan. A specialized Proposition 36 Unit has been established within this division which conducts annual monitoring visits to alcohol and other drug treatment service providers as well as provides on-site technical assistance as appropriate.**

6. Describe the process used to determine client level of need for placement/referral and the process for referral to drug treatment and to additional services supplemental to treatment. [ref: '9515(b)(2)(C)]

The Proposition 36 Monitoring Courts refer clients to one of eleven Community Assessment Service Centers (CASCs) located throughout the County. **Each client is administered the Addiction Severity Index (ASI), a standardized, validated assessment instrument, which assists in the determination of the extent and level of the client’s alcohol and other drug abuse problems and other life situations. Referral to an appropriate treatment program is then made to allow the client to access the level of treatment services and other needed human services, supplemental to treatment, commensurate with the severity of the conditions.** The CASCs have collaborative linkages with substance abuse nonresidential and residential treatment providers, as well as other services systems, that ensures the Proposition 36 clients will have access to a full range of services.

7. Describe the county's drug testing activities, including: [ref: ACLA #01-19]
- a) Types and frequency of drug testing
 - b) The county's guidelines for drug testing of SACPA clients.
 - c) How drug testing using SAPT funds shall be part of the client's individual treatment plan.
 - d) How drug testing results are used, the entity(ies) or agency(ies) that will use the results, and the consequences or results of drug testing to the individual client.
 - e) What aspects of the client's treatment program, in addition to the results of drug testing, will be considered in evaluating the progress of a client's individual treatment program.

Drug testing for Proposition 36 clients ranges from 1-2 times per week and is included in all levels of treatment. While urinalysis is the primary type of drug testing, alternative testing (dip sticks) is acceptable. County guidelines specifically require that testing be observed and that all treatment staff be trained in appropriate protocols and procedures for collecting urine samples and maintaining the chain of evidence. Positive test results are required to be reported to the Court and Probation within 48 hours; however, a positive test does not automatically mandate a Proposition 36 violation and/or dismissal from the program and reinstatement of criminal proceedings. As previously noted, treatment services for alcohol and other drug problems under the Los Angeles County Proposition 36 Plan are based on the basic overarching research-based principles of effective treatment identified by the National Institute on Drug Abuse (NIDA). One of these principles specifically addresses that possible drug use during treatment must be monitored continuously and lapses can occur. **Such monitoring can provide early evidence of drug use so that the individual's treatment plan can be adjusted. The Los Angeles County Plan allows changes in the level of treatment services and return to the Court as necessary to address drug use during treatment. The client's overall compliance, including participation in meetings, and individual and group counseling sessions are all taken into consideration as part of the client's progress in treatment.**

8. Describe the process the county will use to track the provisions of drug treatment and additional services supplemental to treatment as determined by individual assessment of eligible parolees and probationers. [ref: ACLA #01-19; Health and Safety Code Division 10.9]

Los Angeles County has developed the Proposition 36 Treatment Court and Probation eXchange (TCPX) automated data collection system . Standardized reports and forms for intake, treatment referrals, treatment plans and progress reports have been developed for TCPX and allow for the reporting of treatment and other supplemental services to Proposition 36 clients. Regular reports are submitted to the Los Angeles Superior Court, Probation Department and/or the Board of Prison Terms as appropriate.

Original Plan Entity Information for Fiscal Year 2002/2003, Version 1

Status: Draft

Created: 03/21/2002

Last Revised: 04/19/2002

To add/update Plan Entity Information, enter Entity Type and Planned Dollars information and click the Submit button.

Delete Line		Planned Dollars			% ADP Allocation (30,348,378 + 23,600,892 = 53,949,270)
Entity Type		Direct Services	Administrative Activities	Total	
Drug Treatment					
<input checked="" type="checkbox"/>	LA-ADPA	30,746,958	1,831,000	32,577,958	60.39
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
Drug Treatment SubTotal		30,746,958	1,831,000	32,577,958	60.39
Other Service					
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
Other Service SubTotal		0	0	0	0
Criminal Justice					
<input checked="" type="checkbox"/>	Probation Department	5,166,000	0	5,166,000	9.56
<input checked="" type="checkbox"/>	Courts	745,000	0	745,000	1.38
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
Criminal Justice SubTotal		5,901,000	0	5,901,000	10.94
Entity Grand Total		36,647,958	1,831,000	38,478,958	71.32

Delete Line		Planned Dollars			% SATTA Allocation (2,305,726)
Entity Type		Direct Services	Administrative Activities	Total	
<input checked="" type="checkbox"/>	Drug Testing	2,076,153	230,573	2,306,726	100
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
		0	0	0	0
SATTA Entity Grand Total		2,076,153	230,573	2,306,726	100

Original Plan Service/Activity Information for Fiscal Year 2002/2003, Version 1

Status: Draft Created: 03/21/2002 Last Revised: 04/19/2002

To add/update Plan Service/Activity Information, enter Planned Dollars information and click the Submit button.

		Planned Expenditures	% ADP Allocation (30,348,378 + 23,680,892 = 53,949,270)
Services			
Drug Treatment			
Non-Residential/Outpatient			
Treatment/Recovery - No Meds	17,147,416	31.78	
Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed	743,127	1.39	
Day Program-Intensive	2,060,668	3.86	
Detoxification - No Meds	0	0	
Detoxification - Methadone, LAAM, or Other Meds Prescribed	276,897	0.51	
Non-Residential/Outpatient Subtotal	20,248,108	37.53	
Residential			
Detoxification (Hospital)	691,852	1.28	
Detoxification (Non-Hospital) - No Meds	0	0	
Detoxification (Non-Hospital) - Methadone, LAAM, or Other Meds Prescribed	0	0	
Treatment/Recovery - No Meds	10,403,788	19.38	
Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed	0	0	
Residential Subtotal	11,094,850	20.57	
Drug Treatment Subtotal	31,342,958	58.1	
Other Service			
Literacy Training	0	0	
Family Counseling	0	0	
Vocational Training	0	0	
Other Client Services	0	0	
If Other Client Services planned, please provide details below:			
<div> <div>Literacy Training, Family Counseling, and Vocational Training services are already included in drug treatment. Clients in drug treatment receive these additional services as part of their treatment.</div> </div>			
Other Service Subtotal	0	0	
Services Subtotal	31,342,958	58.1	
Case Management Activities			
Referral/Assessment	1,295,000	2.29	
Placement	0	0	
Court Monitoring	745,000	1.38	
Supervision	5,195,000	9.55	
Miscellaneous Activities	0	0	
If Miscellaneous Activities planned, please provide details below:			
<div> <div></div> </div>			
Case Management Activities Subtotal	7,135,000	13.23	
Grand Total	38,478,958	71.32	
		Total Projected Spending	% SATTA (SB 223) Allocation (2,305,726)
SATTA (SB 223)			
Drug Testing for SACPA Clients	2,305,726	100	
Other Purposes	0	0	
SATTA (SB 223) Totals	2,305,726	100	

Original Plan Client Projections for Fiscal Year 2002/2003, Version 1

Status: Draft

Created: 03/21/2002

Last Revised: 04/19/2002

To add/update Client Projections, enter Number of Clients information and click the **Submit** button.

Projected Number of Clients	
Referred From Parole	300
Referred From Court/Probation	14,200
Grand Total	15,000

Projected Number of Clients	
Drug Treatment	
Non-Residential/Outpatient	
Treatment/Recovery - No Meds	2,754
Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed	4,071
Day Program-Intensive	275
Detoxification - No Meds	0
Detoxification - Methadone, LAAM, or Other Meds Prescribed	145
Non-Residential/Outpatient Subtotal	12,745
Residential	
Detoxification (Hospital)	3
Detoxification (Non-Hospital) - No Meds	0
Detoxification (Non-Hospital) - Methadone, LAAM, or Other Meds Prescribed	0
Treatment/Recovery - No Meds	2,247
Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed	0
Residential Subtotal	2,250
Drug Treatment Subtotal	15,000
Other Service	
Literacy Training	0
Family Counseling	0
Vocational Training	0
Other Client Services	0
If Other Client Services planned, please provide details below	
<div>Projected numbers of Literacy Training, Family Counseling, and Vocational Training services are not included here since clients already receive these services as part of their drug treatment.</div>	
Other Service Subtotal	0
Grand Total	15,000

	Total Number of Clients Projected	Total Number of Tests Projected
SAITA (SB 223)		
Drug Testing	15,000	420,000

Original Plan Capacity Projections for Fiscal Year 2002/2003, Version 1

Status: Draft

Created: 03/21/2002

Last Revised: 04/19/2002

To add/update Capacity Projections Information, enter Capacity Information and click the **Submit** button.

	Existing	Capacity Planned Additional	Total
Drug Treatment			
Non-Residential/Outpatient			
Treatment/Recovery - No Meds	5,000	3,000	8,000
Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed	3,900	300	4,200
Day Program-Intensive	800	0	800
Detoxification - No Meds	0	0	0
Detoxification - Methadone, LAAM, or Other Meds Prescribed	0	150	150
Non-Residential/Outpatient Subtotal	9,700	3,450	13,150
Residential			
Detoxification (Hospital)	0	8	8
Detoxification (Non-Hospital) - No Meds	0	0	0
Detoxification (Non-Hospital) - Methadone, LAAM, or Other Meds Prescribed	0	0	0
Treatment/Recovery - No Meds	1,800	517	2,317
Treatment/Recovery - Methadone, LAAM, or Other Meds Prescribed	0	0	0
Residential Subtotal	1,800	525	2,325
Drug Treatment Subtotal	11,500	3,975	15,475
Other Service			
Literacy Training	0	0	0
Family Counseling	0	0	0
Vocational Training	0	0	0
Other Client Services	0	0	0
If Other Client Services exist or are planned, please provide details below			
Additional planned capacity for Literacy Training, Family Counseling, and Vocational Training are not included here since clients receiving drug treatment services also receive these additional services as part of their treatment.			
Other Service Subtotal	0	0	0
Grand Total	11,500	3,975	15,475